

**DECLARATION  
UNDER 35 USC §371(c)(4) FOR  
PCT APPLICATION FOR UNITED STATES PATENT**

As a below named inventor, I hereby declare that:  
my residence, post office address and citizenship are as stated below under my name;

I verily believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought, namely the invention entitled: Primary Carpet Backing

described and claimed in international application number PCT/EP03/03897 filed April 23, 2002 :

I have reviewed and understand the contents of the above-identified specification, including the claims, as amended by any amendment referred to above.

I acknowledge the duty to disclose to the Office all information known to me to be material to patentability as defined in Title 37, Code of Federal Regulations §1.56.

Under Title 35, U.S. Code §119, the priority benefits of the following foreign application(s) filed by me or my legal representatives or assigns within one year prior to my international application are hereby claimed:

German Patent Application No. 10218134.9 Filed April 23, 2002.

The following application(s) for patent or inventor's certificate on this invention were filed in countries foreign to the United States of America either (a) more than one year prior to my international application, or (b) before the filing date of the above-named foreign priority application(s):

ALL CORRESPONDENCE IN CONNECTION WITH THIS APPLICATION SHOULD BE SENT TO OLIFF & BERRIDGE, PLC, P.O. BOX 19928, ALEXANDRIA, VIRGINIA 22320, TELEPHONE (703) 836-6400.

I hereby declare that I have reviewed and understand the contents of this Declaration, and that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

1 *Typewritten Full Name*  
*of Sole or First Inventor*

2 **Inventor's Signature:**

3 **Date of Signature:**

	<u>Rigobert</u>	<u>Leoni Maria</u>	<u>BOSMAN</u>
	Given Name	Middle Initial	Family Name
	<u>09</u>	<u>13</u>	<u>2009</u>
	Month	Day	Year
Residence:	<u>Landgraaf</u>	<u>NLX</u>	<u>The Netherlands</u>
	City	State or Province	Country
Citizenship:	<u>Dutch</u>		
Post Office Address:	<u>Boslaan 11, NL-6371 CN Landgraaf, The Netherlands</u>		
(Insert complete mailing address, including country)			

**Note to Inventor:** Please sign name on line 2 exactly as it appears in line 1 and insert the actual date of signing on line 3.

**IF THERE IS MORE THAN ONE INVENTOR USE PAGE 2 AND PLACE AN "X" HERE ☒**

1 **Typewritten Full Name  
of Joint Inventor**

Andreas

DOLL

Given Name

Middle Initial

Family Name

2 **Inventor's Signature:**

3 **Date of Signature:**

August

Month

30

Day

2004

Year

Residence:

Aschaffenburg

City

DEU

State or Province

Germany

Country

Citizenship:

German

Post Office Address:

(Insert complete mailing  
address, including country)

Obernauerstrasse 10, 63739 Aschaffenburg, Germany

1 **Typewritten Full Name  
of Joint Inventor**

Marcel

Johannes Josephus

WIEGERINCK

Given Name

Middle Initial

Family Name

2 **Inventor's Signature:**

3 **Date of Signature:**

August

Month

26

Day

2004

Year

Residence:

Emmen

City

NLX

State or Province

The Netherlands

Country

Citizenship:

Dutch

Post Office Address:

(Insert complete mailing  
address, including country)

Cameooldreef 28, 7828 CB Emmen, The Netherlands

1 **Typewritten Full Name  
of Joint Inventor**

Given Name

Middle Initial

Family Name

2 **Inventor's Signature:**

3 **Date of Signature:**

Month

Day

Year

Residence:

City

State or Province

Country

Citizenship:

German

Post Office Address:

(Insert complete mailing  
address, including country)

1 **Typewritten Full Name  
of Joint Inventor**

Given Name

Middle Initial

Family Name

2 **Inventor's Signature:**

3 **Date of Signature:**

Month

Day

Year

Residence:

City

State or Province

Country

Citizenship:

Post Office Address:

(Insert complete mailing  
address, including country)

**Note to Inventor:** Please sign name on line 2 exactly as it appears in line 1 and insert the actual date of signing on line 3.

**This form may be executed only when attached to the first page of the Declaration and Power of Attorney of the application to which it pertains.**